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APPLICANTS

Stephen Friend, Ida, MI;

** CONTINUING DATA ***** *Ren*** FOREIGN APPLICATIONS ***** *SM*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>SM</i> Initials	MI	2	10	2

ADDRESS

10291
 RADER, FISHMAN & GRAUER PLLC
 39533 WOODWARD AVENUE
 SUITE 140
 BLOOMFIELD HILLS , MI
 48304-0610

TITLE

Bottle retainer

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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